U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards Washington, DC 20210 FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT MUST BE USED BY LABOR ORGANIZATIONS WITH \$200,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

Form Approved Office of Management and Budget No. 1215-0188 Expires: 11-30-2002

TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

	READ THE IN	ISTRUCTIONS CA	REFULLY BEFORE PREPAR	ING THIS REPORT	
For Official Use Only	1. FILE NUMBER	2. PERIOD COV		3. (a) AMENDED — If this is an amended report correcting	a previously
	I. FILE NOMBER	MC		filed report, check here:	
S DOL E	071-083	From 0	1 0 1 2 0 0 1	(b) TERMINAL — If your organization ceased to exist and terminal report, see Section XII of the instructions and	I this is its check here:
#R-4202					enization of
E QUEDROY		Through 1	2 3 1 2 0 0 1	(c) SUBSIDIARY — If this is a report for a subsidiary organization with the instructions, or the instructions, or the instructions.	check here:
		8. N	AILING ADDRESS		
		Firs	t Name		
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			Box · Building and Room Nu		
		S	UITE 20	3	
4. AFFILIATION OR ORGANIZATION		Nu	nber and Street		
H.E.R.E. INTERNATIONA	AL UNION		9 1 0 N . W	. 25TH STREET	
5. DESIGNATION (Local, Lodge, etc.)	6. DESIGNATIO	N NUMBER	0 10 11 11	· ZOTH OTHELT	
		Cit			
7, UNIT NAME (if any)		——- [м	IAMI		
N/A		01-	7/0.0-1-1.4		
9. Are your organization's records kept	at its mailing address? K	Sta			
(If "No," provide address in Item 75.)	at its mailing address? Yes	No □ F	L 3 3 1 2 2		
75. ADDITIONAL INFORMATION					
Item Number					
Rem Mumber					
1					
					-
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Each of the undersigned, duly authorized office accompanying documents) has been examine	cers of the above labor organization ed by the signatory and is, to the be	 declares, under the st of the undersigned 	applicable penalties of law, that all sknowledge and belief, true, com-	of the information submitted in this report (including the informatic, and complete. (See Section VI on penalties in the instruct	ation contained in any tions.)
76.		PRESIDENT	77. SIGNED:	^ ^ \	TREASURER
SIGNED:		(If other title,		Wight & 1 School	(If other title,
1 150/00 1	305 463 006.	see instruction	ns.) / 3 20 0	2 305463-0065	see instructions.)
Date	Telephone Number		Date		
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During the Reporting Period Did Your Organization:			18. How many members did your
10. Have a "subsidiary organization" as defined in	Yes	No X	organization have at the end of the reporting period?
Section X of the instructions?	L.J		19. What is the date of your organization's MO YEAR 0 6 2 0 0 2
11. Create or participate in the administration of a			next regular election of officers?
trust or other fund or organization, as defined in the instructions, which provides benefits for	X		What is the maximum amount recoverable under your organization's fidelity bond
members or their beneficiaries?			for a loss caused by any officer or employee of your organization?
12. Have a political action committee (PAC) fund?	X		21. What are your organization's rates of dues and fees? (Enter a minimum and maximum if more than one rate
			applies for any line.) Rates of Dues and Fees
Acquire or dispose of any goods or property in any manner other than by purchase or sale?		X	(a) Regular Dues/Fees \$
44 11			(Month, Year, etc.)
 Have an audit or review of its books and records by an outside accountant or by a parent body 		X	(b) Initiation Fees \$N/A
auditor/representative?			(c) Transfer Fees \$
15. Discover any loss or shortage of funds or		X	(d) Work Permits \$\frac{N/A}{per} \frac{N/A}{(Month, Year, etc.)}
other property?(Answer "Yes" even if there has been repayment			22. During the reporting period, did your organization
or recovery.)			have any changes in its constitution and bylaws
16. Have any officer who was paid \$10,000 or more			(other than rates of dues and fees) or in practices/ procedures listed in the instructions?
by your organization and also received \$10,000 or more as an officer or employee of another labor			(If the constitution and bylaws or practices/ procedures have changed, see the instructions.)
organization or of an employee benefit plan?	X		procedures have changed, see the instructions.)
17. Liquidate or reduce any liabilities without			23. Were any of your organization's assets pledged
disbursement of cash?		X	as security or encumbered in any other way at the end of the reporting period?
			24. Did your organization have any contingent liabilities at the end of the reporting period?
(If the answer to any of the above questions is "Yes," pro in Item 75 as explained in the instructions for each item.)		tails	(If the answer to Item 23 or 24 is "Yes," provide details in Item 75.)

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Complete Schedules 1 Through 15 Before Completing Statement A

Enter Amounts in Dollars Only -- Do Not Enter Cents

	ASSETS	From SCH #	Start of Reporting Period (A)	End of Reporting Period (B)
	25. Cash		3 6 8 0 4	2 3 3 9 2
	26. Accounts Receivable		0	0
TS:	27. Loans Receivable	1	0	0
ASSETS	28. U.S. Treasury Securities		0	0
	29. Investments	2	0	0
	30. Fixed Assets	5	0	0
	31. Other Assets	3	3 2 1 7	3 2 1 7
	32. TOTAL ASSETS		4 0 0 2 1	2 6 6 0 9
	LIABILITIES Item	From SCH #	Start of Reporting Period (C)	End of Reporting Period (D)
	33. Accounts Payable		0	0
ES	34. Loans Payable	8	5 7 0 2 5 2	5 5 9 2 5 2
LIABILITIES	35. Mortgages Payable		0	0
LIA	36. Other Liabilities	4	0	5 2 5
	37. TOTAL LIABILITIES		5 7 0 2 5 2	5 5 9 7 7 7
1	20 NET ACCETO		<u> </u>	[
	38. NET ASSETS (Item 32 less Item 37)		- 5 3 0 2 3 1	- 5 3 3 1 6 8

Complete Schedules 1 Through 15 Before Completing Statement B

Enter Amounts in Dollars Only - Do Not Enter Cents

•			<u> </u>		······································
CASH RECEIPTS	From SCH #	AMOUNT	CASH DISBURSEMENTS Item	From SCH #	AMOUNT
39. Dues		8 3 2 6 9 0	56. To Officers	9	1 1 8 1 4 4
40. Per Capita Tax		0	57. To Employees	10	8 1 1 4 7
41. Fees		0	58. Per Capita Tax		3 3 1 3 1 5
42. Fines		0	59. Fees, Fines, Assessments, etc		0
43. Assessments		0	60. Office & Administrative Expense	13	1 2 6 7 2 3
44. Work Permits		0	61. Educational & Publicity Expense		0
45. Sale of Supplies		0	62. Professional Fees		3 5 2 4 7
46. Interest		6 3	63. Benefits	11	3 9 6 6 3
47. Dividends		0	64. Contributions, Gifts & Grants	12	5 4 1 9
48. Rents		0	65. Supplies for Resale		0
49. Sale of Investments & Fixed Assets	6	0	66. Direct Taxes		2 0 3 8 1
50. Loans Obtained	8	0	67. Withholding Taxes		4 6 7 9 4
51. Repayments of Loans Made	1	0	68. Purchase of Investments & Fixed Assets	7	0
52. On Behaif of Affiliates for Transmittal to Them		0	69. Loans Made	1	. 0
53. From Members for Disbursement on Their Behalf		0	70. Repayment of Loans Obtained	8	1 1 0 0 0
54. Other Receipts	14	1 2 5 4 2	71. To Affiliates of Funds Collected on Their Behalf		0
-			72. On Behalf of Individual Members		1 5 5 0
			73. Other Disbursements	15	4 1 3 2 4
55. TOTAL RECEIPTS		8 4 5 2 9 5	74. TOTAL DISBURSEMENTS		8 5 8 7 0 7

Enter Amounts in Dollars Only - Do Not Enter Cents

SCHEDULE 1 – LOANS RECEIVABLE

List below loans to officers, employees, or members which at any time during the reporting	Loans		Repayments Recei	ved During Period	Loans
period exceeded \$250 and list all loans to business enterprises regardless of amount. (A)	Outstanding at Start of Period (B)	Loans Made During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	Outstanding at End of Period (E)
1.					
		:			
2.					
3.					
		:			
4. Totals from additional pages (if any)					
5. Totals of loans not listed above	0	0	0	0	(
5. Totals of Lines 1 through 5	0	0	0	0	(
The totals from Line 6 are entered in	ltem 27 Column (A)		Item 51	Item 75 with Explanation	

SCHEDULE 2 - INVESTMENTS (OTHER THAN U.S. TREASURY SECURITIES)

FILE NUMBER: 0 7 1 - 0 8 3

SCHEDULE 3 - OTHER ASSETS

Description (A)	Amount (B)	Description (A)	Book Value (B)
Marketable Securities 1. Total Cost	0	1. Security deposits	3 2 1 7
2. Total Book Value	0	3.	
List each marketable security which has a book value over \$1,000 and exceeds 20% of Line 2.		4.	
(a) None	. 0	5.	
(b)		6. Total from additional pages (if any)	
(c)		7. Total of Lines 1 through 6	3 2 1 7
(d)		The total from Line 7 is entered in	Item 31, Column (B)
Other Investments 4. Total Cost	0	SCHEDULE 4 - OTHER	R LIABILITIES
5. Total Book Value	0	Description (A)	Amount at End of Period
List each other investment which has a book value over \$1,000 and exceeds 20% of Line 5. Also list each subsidiary for which separate reports are attached.		1. H.E.R.E. Tip Fund	(B) 5 2 5
(a) None	0	2.	
(b)		4.	
(c)	····	5.	
(d)			
(e) Total from additional pages (if any)		6. Total from additional pages (if any)	
7. Total of Lines 2 and 5	0	7. Total of Lines 1 through 6	5 2 5
The total from Line 7 is entered in	Item 29, Column (B)	The total from Line 7 is entered in	Item 36, Column (D)
orm LM-2 (Revised 2000)	3	ا اـــــــــــــــــــــــــــــــــــ	Page 6 of 12

SCHEDULE 5 - FIXED ASSETS

FILE NUMBER: 0 7 1 - 0 8 3

0	0		0	0
0	0		0	0
0	0		0	0
				<u> </u>
	· · · · · · · · · · · · · · · · · · ·			
0	0			0
0	0			0
9 2	21392	()	0
9 2	21392	()	0
(0 9 2 9 2	9 2 2 1 3 9 2	0 0 0	9 2 2 1 3 9 2 0

SCHEDULE 6 - SALE OF INVESTMENTS AND FIXED ASSETS

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. None	0	0	0	0
2				·-·
3.				
4.				
5. Totals from additional pages (if any)				
6. Totals of Lines 1 through 5	0	0	0	0
	7. Less Reinvestments			0
	8. Net Sales			0
The total from Line 8 is entered in	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Item	49

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SCHEDULE 7 – PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 0 7 1 - 0 8 3

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. None	0	0	0
2.			
3.	·		
4.			
5. Totals from additional pages (if any)			
6. Totals of Lines 1 through 5	0	0	. 0
	7. Less Reinvestments		0
	8. Net Purchases		0
The total from Line 8 is entered in		Iten	n 68

SCHEDULE 8 -- LOANS PAYABLE

Course of Laura Daughla of Ann			^			İ	Lana Obtained			Re	pay	ment	Made	During Period)wed		
Source of Loans Payable at Any Time During the Reporting Period (A)			ns O rt of (B	Perio			Loans Obtained During Period (C)		——— ···	Ca (D)				Other Than Cash (D)(2)			at d				
1. H.E.R.E. International Union	5	7	0	2	5	2		0	1	1	0	0	0		0	5	5	9	2	5	2
2.																					
3.																					
4.									 -						_						
5. Totals from additional pages (if any)																					
6. Totals of Lines 1 through 5	5	7	0	2	5	2		0	1	1	0	0	0		0	5	5	9	2	5	- 2
The total from Line 6 is entered in		ite	em 3 lumn	4 ı (C)	•••••	•••••	item 50		Ite	m 70	0			ltēm 75with Explanatio	n	If	ten (n 34 Colu	mn (C))	
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SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: 0 7 1 - 0 8 3

	(A) Name (List all persons who held office during the reporting period they received no salary or other disbursements.)		(befo		axe	es	and			Disbu for	rse Offi			Other				<u> </u>			
	(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)*	other		duo D)	ctic	ns)	Allowances (E)	Ви	sine (F)			Disburseme (G)	nts			To (ŀ			
1.	BALASH ANDRE SEC-TREASURER	С		3 !	9 . 1	6	7	5	0	1	2 3	3 3	5		0		į	5 2	0	1	0
2.	SANTIESTEBAN JORGE PRESIDENT	С		4 4	1 (6	8	5	0		4]	L 8	7		0		4	4 8	8	7	2
3.	BADIO MARIE VICE PRESIDENT	С	:	2 9	9 !	5	5	0	0		1 1	. 8	6		0			3 0	7	3	6
4.	JOYNER ANNIE EXECUTIVE BOARD	С				5	0	0	0			L 6	0		0				6	6	0
5.	PRACHAYASATI BOBY EXECUTIVE BOARD	С		;	L (0	0	0	0			. 8	0		0			1	. 1	8	0
6.	GONZALEZ CARLOS EXECUTIVE BOARD	С				4	5	0	0			8	0		0		_		5	3	0
7.	SEYMOUR DANIEL EXECUTIVE BOARD	С				5	0	0	0			8	0		0	<u> </u>			5	8	0
8.	Totals from additional pages (if any)				6	0	5	0	0		1 2	2 0	0		0				7 2	 ≥ 5	5 0
9. '	Totals of Lines 1 through 8		1	2	2	4	1	0	0	1 :	9 4	0	8		0	Γ	1	4	1 8	3 1	8
										10. Le	ss D	edu	ction	s		2	3	6	7	, 	4
	The total from Line 11 is entered in						•••••	Ite	em 56	11. Ne	t Dis	bur	seme	ents	1	1	8	1	4	<u> </u>	4
*C	ode for Status (C): past officer - P; continuing officer - C; new officer	er during th	e reporti	ng p	erio	d -	N.			(If any your o	offic rgani	er w zatio	as no n's c	t elected at a regula onstitution and bylav	r elec vs, ex	tion ir. plain	acci in Ite	ordar m 75	ice v	ìth	

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SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 0 7 1 - 0.8 3

(A) Name (List all employees who received more than \$10,000 in total disbursem from your organization and any affiliates.)		· · · · · · · · · · · · · · · · ·	Disbursements for Official	0	
(B) Position (Enter employee's job title.)	(before taxes and other deductions)	Allowances	D	Other Disbursements	Total
(C) Name of Affiliated Organization (if applicable)	(D)	(E)	(F)	(G)	(H)
HERNANDO ILEANA	3 1 0 5 0	0	390	0	31440
1. BOOKEEPER			:		
С					
ARMERO MARCOS	36350	0	3 3 4 8	0	39698
2. ORGANIZER					
С					
FERNANDEZ MARIANA	25475	0	214	0	25689
3. CLERICAL					
c					
4.					
5.					
6. Totals from additional pages (if any)					
Totals for all employees who, during the reporting period, received \$10,000 or less in total disbursements from your organization and any affiliates	6 7 5 1	0	689	0	7 4 4 0
8. Totals of Lines 1 through 7	99626	0	4641	0	104267
			9. Less Deductions		2 3 1 2 0
The total from Line 10 is entered in	Iter	m 57	10. Net Disbursement	ts	8 1 1 4 7
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SCHEDULE 11 - BENEFITS

FILE NUMBER: 0 7 1 - 0 8 3

Description (A)	To Whom Paid (B)		ioun C)	t		
1. Pension	Trust Fund	1	8	1	1	8
2. Health and Welfare	Trust Fund	2	1	5	4	5
3.						
4.						
5. Total from additional pages (if any)						
6. Total of Lines 1 through 5		3	9	6	6	3
The total from Line 6 is entered in		It	em 6	3		

SCHEDULE 12 - CONTRIBUTIONS, GIFTS & GRANTS

SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE

Description (A)				ount 3)			
1. Bank Fees			-		5	2	8
2. Dues & subscriptions		•		1	5	8	3
3. Equipment rental	•		2	2	5	5	4
4. Insurance				3	7	0	9
5. Licenses					5	2	5
6. Office	-		1	7	8	6	3
7. Total from additional pages (if any)			7	9	9	6	1
8. Total of Lines 1 through 7		1	2	6	7	2	3
The total from Line 8 is entered in	 	*****	. Ite	m 60)	-	

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SCHEDULE 14 - OTHER RECEIPTS

Amount Description (B) (A) 5 0 0 0 1 Subsidy - HERE International 2 2 4 8 2 Reimbursements 3 Miscellaneous income 5 2 9 4 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. Total from additional pages (if any) 17. Total of Lines 1 through 16 1 2 5 4 2 The total from Line 17 is entered in Item 54

SCHEDULE 15 - OTHER DISBURSEMENTS

Description (A)	Amount (B)		
1.Auto	6	3 6	8
2.Travel	2	9 3	3 2
3.Meetings & conventions	2 1	4 6	3 1
4.Organizing	1 0	1 1	1 6
_{5.} Shop stewards		4 4	1 7
6.			
7.			
8.			
9.			
10.			
11.		-	
12.			
13.			
14.			
15.			
16. Total from additional pages (if any)			
17. Total of Lines 1 through 16	4 1	3 2	2 4
The total from Line 17 is entered in	Item 73		

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ORGANIZATION NAME:
H.E.R.E. INTERNATIONAL UNION

ENDING DATE OF PERIOD COVERED: 12/31/2001

SCHEDULE 9 – ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name (List all persons who held office during the reporting period every they received no salary or other disbursements.)	en if	Gross Salary (before taxes and		Disbursements for Official	Other	
(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)*	other deductions) (D)	Allowances (E)	Business (F)	Disbursements (G)	Total (H)
PRADO DESIDER EXECUTIVE BOARD	С	1 0 0 0	0	180	0	1180
EABCUITVE BOARD						
SOTO JAMES	a	900	0	180	0	1080
EXECUTIVE BOARD	С					
emile jean		1 0 0 0	0	180	0	1 1 8 0
EXECUTIVE BOARD	С					
FORTE LEVY		1000	0	2 0 0	0	1 2 0 0
EXECUTIVE BOARD	С					
ACEVEDO LUIS		1 0 0 0	0	180	0	1180
EXECUTIVE BOARD	C					
GAYON RUBEN		1 0 0 0	0	180	0	1 1 8 0
EXECUTIVE BOARD	C					
COMPANY ALBANIA		1 5 0	0	100	0	2 5 0
EXECUTIVE BOARD	С					
	-					
					-	

	1 ·
ORGANIZATION NAME:	1
H.E.R.E. INTERNATIONAL UNION	
ENDING DATE OF PERIOD COVERED:]

SCHEDULE 13 – OFFICE & ADMINISTRATIVE EXPENSE (continued)

2 1 3	1 9 3 0	3 9 4 4 4 9 3	0 3 1 1 4 6 4	3 6 5 3 2 9 6 7
1	9 3 0	4 4 9 3	3 1 1 4 6	5 3 2 9 6
1	3 0	4 4 9 3	1 1 4 6	3 2 9 6
1	0	9	1 4 6	9
	1	9	6	9
3		3	6	6
3				
3	1	1	4	7
			_	
				
				_
_				

12/31/2001

DRGANIZATION NAME:	,
H.E.R.E. INTERNATIONAL UNION	
NDING DATE OF PERIOD COVERED:	
19/24/9004	

75. ADDITIONAL INFORMATION

umber 4	Courth Florida Culinon (Morkeya Molfora Fund Hotel Industry Dancion Fund The charge and idea and in the charge and idea and in the charge and idea
1	South Florida Culinary Workers Welfare Fund Hotel Industry Pension Fund. The above provide welfare and pension benefits to members of Local 355 and are located in Miami, FL.

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•	
ORGANIZATION NAME:	
H.E.R.E. INTERNATIONAL UNION	\Box
ENDING DATE OF PERIOD COVERED:	\neg
12/31/2001	

75. ADDITIONAL INFORMATION (continued)

m Number	
12	Local 355 maintained a Political Action Committee account which does not file returns with any state, local or federal agency. The activities of the P.A.C. account are included in this LM report.
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ORGANIZATION NAME:	
H.E.R.E. INTERNATIONAL UNION	
NDING DATE OF PERIOD COVERED:	
12/31/2001	

75. ADDITIONAL INFORMATION (continued)

Item Number	
16	Andre Balash also serves as a representative for the H.E.R.E. International Union.
'	
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